Fill in this information to identify your case:										
Debtor 1	Mark A. Shorette									
Debtor 2 (Spouse, if filing)	Stacy A Shorette									
United States E	Bankruptcy Court for the: Eastern District of Pennsylvania									
Case number (if known)	24-10007									

Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:									
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

## Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 4,319.00 3,575.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 0.00 0.00 Copy here -> \$ Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

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otor 1 otor 2				Case number	(if known)	24-10007	•	
				Column A Debtor 1		Column B Debtor 2 o	or	
Ir	nterest, dividends, and royalties			\$	0.00	\$	0.00	
	nemployment compensation			\$	0.00	\$	0.00	
D	o not enter the amount if you contend that the am	nount received was a bene	efit under	·	0.00		0.00	
	For you	\$	0.00					
	For your spouse		0.00					
bi ni U di pi	ension or retirement income. Do not include an enefit under the Social Security Act. Also, except of include any compensation, pension, pay, annuinited States Government in connection with a dissisability, or death of a member of the uniformed say paid under chapter 61 of title 10, then include to oes not exceed the amount of retired pay to which retired under any provision of title 10 other than of	\$	0.00	\$	0.00			
. <b>Ir</b> D re de U	ncome from all other sources not listed above. To not include any benefits received under the Social eceived as a victim of a war crime, a crime against omestic terrorism; or compensation, pension, pay inited States Government in connection with a distinguish, or death of a member of the uniformed separate on a separate page and put the total below	Specify the source and a cial Security Act; payment thumanity, or international, annuity, or allowance parability, combat-related injectives. If necessary, list of the security is the security of the security and security in the security and security a	ts al or aid by the ury or					
				\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any			\$	0.00	\$	0.00	
	alculate your total average monthly income. A ach column. Then add the total for Column A to the ach column between the column	ne total for Column B.	\$	3,575.00	+ \$ _	4,319.00		7,894.00
^		ino 44					Ф.	7.004.00
	opy your total average monthly income from li alculate the marital adjustment. Check one:	ine 11.					\$	7,894.00
C	<u>,</u>							
	•	way Fill in O balaw						
	You are married and your spouse is filing with You are married and your spouse is not filing. Fill in the amount of the income listed in line 1 dependents, such as payment of the spouse's Below, specify the basis for excluding this incoadjustments on a separate page.	with you. 1, Column B, that was No s tax liability or the spouse	e's suppo	rt of someone	other th	nan you or you	ur depend	ents.
	If this adjustment does not apply, enter 0 belo	W.						
			_ \$		_			
					_			
			_ +\$					
	Total		\$	0.00	)   C(	opy here=>		0.0
,	Your current monthly income. Subtract line 13	from line 12.					\$	7,894.00
(	Calculate your current monthly income for the	year. Follow these steps	s:					
	15a. Copy line 14 here=>						\$	7,894.00

Debtor 1

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Debtor 1 Debtor 2			ark A. Shorette acy A Shorette Case number (if known) 24-1										24-10	007										
		Mu	ltipl	y line 15	a by 1	2 (the	number	of mor	nths in	n a ye	ar).									<b>x</b> 12				
,	15b. The result is your current monthly income for the year for this							is part	part of the form								\$	94	,728.00	-				
16. <b>C</b>	alcu	late	the	median	family	/ inco	ne that	applie	es to y	you. F	Follow	these s	steps:											
16	6a. F	ill in	the	state in	which	you liv	е.		-		PA		_											
16	6b. F	ill in	the	number	of peo	ple in	your ho	usehol	d.		2		_											
16	Т	o fin	d a	median list of ap ns for thi	plicab	e med	ian inco	ome am	nounts	s, go d	online	using tl					eparate	 Ə			\$	78	,349.00	-
17. <b>H</b>	ow o	do th	e li	nes con	npare?	•																		
17	7a.			ine 15b i 1 <i>U.S.C.</i>																			mined un	der
17	7b.		1:		). <b>Go</b> t	o Part	3 and	fill out	Calcu	ulatio	n of Y												1 U.S.C. at form, o	
Part 3:		Cal	-	ate Your		-						25(b)(4	l)											
18. <b>C</b>	ору	you	r tot	tal avera	ige mo	nthly	incom	e from	line 1	11.										\$			7,894.0	00
cc	onter	nd th	at c	arital ad alculating ne, copy	g the c	ommit	ment pe	eriod ur		marr	ied, yo	ur spo	use is r	not f	filing wit	th you	, and yo	ou		_				
19	9a. If	f the	mar	rital adjus	stment	does	not app	ly, fill in	n 0 on	line 1	19a.									<b>-</b> \$_			0.0	)0
				line 19a																	\$	7	,894.00	-
			-	<b>ir curre</b> r : 19b	nt mon	thly ir	come	for the	year.	. Follo	ow the	se step	S:								¢	7	,894.00	
20				y 12 (the	e numb	per of r		in a yea													Ψ X	12	<u>*</u>	=
20	0b. T	⊺he r	esul	lt is your	currer	it mon	hly inco	ome for	r the y	ear fo	or this	oart of	he forn	m							\$	94	,728.00	-
20	0c. C	Сору	the	median	family	incom	e for yo	ur state	e and	size o	of hous	sehold	from lin	ne 16	6c						\$	78	,349.00	-
2	1. <b>F</b>	low	do t	the lines	com	oare?																		
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	ı			20b is n nmitment						nless	otherw	ise ord	ered by	y the	e court,	on the	e top of	f page	e 1 of t	his for	m, che	eck b	oox 4, <i>Th</i>	е
Part 4:		Sig	n B	elow																				
B	y sig	ning	her	e, under	penal	y of pe	erjury I	declare	that t	the inf	format	ion on 1	his stat	item	ent and	l in an	y attach	hmen	nts is tr	ue and	d corre	ect.		
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Debtor 1 Debtor 2 Stacy A Shorette Case number (if known) 24-10007

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Debtor 1 Debtor 2 Stacy A Shorette

Case number (if known) 24-10007

# **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period 07/01/2023 to 12/31/2023.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Sodexho

Constant income of \$3,575.00 per month.

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Debtor 1 Debtor 2 Mark A. Shorette
Stacy A Shorette

Case number (if known)

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### **Current Monthly Income Details for the Debtor's Spouse**

**Spouse Income Details:** 

Income for the Period 07/01/2023 to 12/31/2023.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Bethlehm School District** Constant income of **\$4,319.00** per month.